

NORTH DAKOTA

Community Grant Program Empowers North Dakotans to Prevent Cancer

Cancer Burden

Cancer issues are a rising concern in North Dakota. Overall cancer incidence and death rates increase with increasing age after age 50 for both sexes, but with higher rates in males than females (North Dakota Cancer Registry, 2008). For North Dakotans, the five most common late-stage cancer diagnoses from 1997–2006 were lung cancer (80%), followed by colorectal (58%), cervical (45%), female breast (30%), and prostate (14%) cancers. Among these cancers, four of them—lung, colorectal, breast, and prostate—account for 55% of cancer cases in North Dakota (ND Cancer Registry, 2008). These same four cancers account for 49% of cancer deaths in the state (ND Division of Vital Records, 2008).

While overall cancer incidence rates have been decreasing in recent years among U.S. whites and American Indians (Espey et al., 2007; CDC, 2010), high rates remain among American Indians residing in certain geographic regions, including the Northern Plains, Southern Plains and Alaska (Espey et al., 2007). Regarding cancer mortality, Northern Plains Indians, including North Dakota tribes, have higher rates than the U.S. for prostate, lung, colorectal, and cervical cancers (Haverkamp et al., 2008). Moreover, rates vary among different American Indian populations; Northern Plains Indians have higher cancer mortality rates than all other Indian Health Service regions for all-site, prostate, lung and cervical cancers and are second-highest to Alaska for female breast cancer mortality (Haverkamp et al., 2008).

American Indians are the largest racial minority group in North Dakota, comprising about 5% (N=31,329) of the population. Analysis of the state's Behavioral Risk Factor Surveillance System (BRFSS) data indicated a number of adverse health-related risk factors among North Dakota's Native American adults. Compared to their Caucasian counterparts, Native Americans had higher percentages of current smokers, obesity, and delays in mammography, colonoscopy or sigmoidoscopy, and blood stool testing (BRFSS, 2008).

With the cancer burden identified and the North Dakota Cancer Plan as a guide, the North Dakota Cancer Coalition (NDCC) chose priority areas of

prevention, early detection, and screening with a vision of decreasing cancer incidence and death in North Dakota among all North Dakotans, including tribal communities.

Evaluation of community grant activities is beginning to show a positive behavioral and attitude change regarding the importance of cancer prevention and screening as evidenced by participant evaluations

The Solution

The North Dakota Cancer Coalition Community Grant Program is a grassroots effort for NDCC members and partners to provide seed money to implement priority cancer prevention and control activities, identified above, at the local level. Five of the 20 community grants served tribal communities.

The Community Grant Program provides:

- Funding to implement, expand, and enhance cancer intervention projects outlined in the cancer plan at the local level.
- Resources to support cancer prevention activities at the local level.
- Support for cancer-related training and data needs.

The 2007–2008 and 2008–2009 community grant projects focused on areas such as:

- Colorectal cancer education and screening.
- Breast and cervical cancer education and screening.
- Prostate cancer education and screening.
- The link between nutrition and physical activity, and cancer prevention.
- Human papillomavirus education and vaccination (middle and secondary schools in western North Dakota).

Stories of Success

- Smoking cessation and oral cancer screening (college campus).
- Survivorship (developed and launched a survivorship web site with North Dakota resources).

Impact

The NDCC provided 20 community grants in the first 2 years of cancer plan implementation across North Dakota communities, including tribal areas. The Program funded a variety of organizations, including public health centers, cancer centers, hospitals, community programs, and tribal communities. These organizations have impacted cancer prevention and screening efforts in urban, rural, and tribal settings across the state.

Evaluation of community grant activities is beginning to show a positive behavioral and attitude change regarding the importance of cancer prevention and screening as evidenced by participant evaluations. Evaluations also show that providing additional education and opportunities for free and low-cost

screening increase individuals' ability to complete age-appropriate screening tests.

The North Dakota Cancer Coalition Community Grant Program is supported by the North Dakota Department of Health Comprehensive Cancer Prevention and Control Program. The Coalition is made up of more than 180 partner organizations across the state with a common vision of reducing cancer incidence and death in North Dakota.

References

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